

Fill in this information to identify your case:

Debtor 1 Antonia Flores
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Central District of California

Case number
(If known) _____

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☐ Married
☒ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

| Debtor 1: | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there |
|---------------------------------------|----------------------------|---|---|
| | | <input type="checkbox"/> Same as Debtor 1 | <input type="checkbox"/> Same as Debtor 1 |
| Number _____ Street _____ | From _____ To _____ | Number _____ Street _____ | From _____ To _____ |
| City _____ State _____ ZIP Code _____ | | City _____ State _____ ZIP Code _____ | |
| | | <input type="checkbox"/> Same as Debtor 1 | <input type="checkbox"/> Same as Debtor 1 |
| Number _____ Street _____ | From _____ To _____ | Number _____ Street _____ | From _____ To _____ |
| City _____ State _____ ZIP Code _____ | | City _____ State _____ ZIP Code _____ | |

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No
☐ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

Part 2: Explain the Sources of Your Income

Debtor 1 **Antonia** **Flores**
First Name Middle Name Last Name

Case number (if known) _____

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☒ No
☐ Yes. Fill in the details.

| | Debtor 1 | Debtor 2 |
|--|---|--|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | <input type="checkbox"/> Wages, commissions, bonuses, tips \$ _____ <input type="checkbox"/> Operating a business |
| For last calendar year: (January 1 to December 31, _____) YYYY | <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | <input type="checkbox"/> Wages, commissions, bonuses, tips \$ _____ <input type="checkbox"/> Operating a business |
| For the calendar year before that: (January 1 to December 31, _____) YYYY | <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | <input type="checkbox"/> Wages, commissions, bonuses, tips \$ _____ <input type="checkbox"/> Operating a business |

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No
☐ Yes. Fill in the details.

| | Debtor 1 | Debtor 2 |
|--|--|---|
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | _____ \$ _____ _____ \$ _____ _____ \$ _____ | _____ \$ _____ _____ \$ _____ _____ \$ _____ |
| For last calendar year: (January 1 to December 31, _____) YYYY | _____ \$ _____ _____ \$ _____ _____ \$ _____ | _____ \$ _____ _____ \$ _____ _____ \$ _____ |
| For the calendar year before that: (January 1 to December 31, _____) YYYY | _____ \$ _____ _____ \$ _____ _____ \$ _____ | _____ \$ _____ _____ \$ _____ _____ \$ _____ |

Debtor 1 Antonia Flores
First Name Middle Name Last Name

Case number (if known) _____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☒ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

| | Dates of payment | Total amount paid | Amount you still owe | Was this payment for... |
|---------------------------------------|------------------|-------------------|----------------------|---|
| Creditor's Name _____ | _____ | \$ _____ | \$ _____ | <input type="checkbox"/> Mortgage |
| Number _____ Street _____ | _____ | | | <input type="checkbox"/> Car |
| _____ | _____ | | | <input type="checkbox"/> Credit card |
| City _____ State _____ ZIP Code _____ | | | | <input type="checkbox"/> Loan repayment |
| | | | | <input type="checkbox"/> Suppliers or vendors |
| | | | | <input type="checkbox"/> Other _____ |
| Creditor's Name _____ | _____ | \$ _____ | \$ _____ | <input type="checkbox"/> Mortgage |
| Number _____ Street _____ | _____ | | | <input type="checkbox"/> Car |
| _____ | _____ | | | <input type="checkbox"/> Credit card |
| City _____ State _____ ZIP Code _____ | | | | <input type="checkbox"/> Loan repayment |
| | | | | <input type="checkbox"/> Suppliers or vendors |
| | | | | <input type="checkbox"/> Other _____ |
| Creditor's Name _____ | _____ | \$ _____ | \$ _____ | <input type="checkbox"/> Mortgage |
| Number _____ Street _____ | _____ | | | <input type="checkbox"/> Car |
| _____ | _____ | | | <input type="checkbox"/> Credit card |
| City _____ State _____ ZIP Code _____ | | | | <input type="checkbox"/> Loan repayment |
| | | | | <input type="checkbox"/> Suppliers or vendors |
| | | | | <input type="checkbox"/> Other _____ |

Debtor 1 Antonia Flores
First Name Middle Name Last Name

Case number (if known) _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- ☒ No
☐ Yes. List all payments to an insider.

| | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
|--|------------------|-------------------|----------------------|-------------------------|
| Insider's Name _____ Number Street _____ City State ZIP Code _____ | _____ | \$ _____ | \$ _____ | |
| Insider's Name _____ Number Street _____ City State ZIP Code _____ | _____ | \$ _____ | \$ _____ | |

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
☐ Yes. List all payments that benefited an insider.

| | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
|--|------------------|-------------------|----------------------|--|
| Insider's Name _____ Number Street _____ City State ZIP Code _____ | _____ | \$ _____ | \$ _____ | |
| Insider's Name _____ Number Street _____ City State ZIP Code _____ | _____ | \$ _____ | \$ _____ | |

Debtor 1 **Antonia** **Flores**
First Name Middle Name Last Name

Case number (if known) _____

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☒ No
☐ Yes. Fill in the details.

| Nature of the case | Court or agency | Status of the case |
|--|--|--|
| Case title _____ _____ Case number _____ | Court Name _____ Number Street _____ City State ZIP Code _____ | <input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |
| Case title _____ _____ Case number _____ | Court Name _____ Number Street _____ City State ZIP Code _____ | <input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

- ☒ No. Go to line 11.
☐ Yes. Fill in the information below.

| Describe the property | Date | Value of the property |
|---|-------|-----------------------|
| Creditor's Name _____ Number Street _____ City State ZIP Code _____ | _____ | \$ _____ |
| Explain what happened <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied. | | |
| Creditor's Name _____ Number Street _____ City State ZIP Code _____ | _____ | \$ _____ |
| Explain what happened <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied. | | |

Debtor 1 **Antonia** **Flores**
First Name Middle Name Last Name

Case number (if known) _____

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

| Creditor's Name | Describe the action the creditor took | Date action was taken | Amount |
|--|---------------------------------------|-----------------------|----------|
| Number _____ Street _____ City _____ State _____ ZIP Code _____ | | | \$ _____ |
| Last 4 digits of account number: XXXX-____-____-____ | | | |

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☐ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
☐ Yes. Fill in the details for each gift.

| Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
|--|--------------------|--------------------------|----------|
| Person to Whom You Gave the Gift _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Person's relationship to you _____ | | | \$ _____ |
| Person to Whom You Gave the Gift _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Person's relationship to you _____ | | | \$ _____ |

Debtor 1 **Antonia** **Flores**
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14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No
☐ Yes. Fill in the details for each gift or contribution.

| Gifts or contributions to charities that total more than \$600 | Describe what you contributed | Date you contributed | Value |
|---|-------------------------------|----------------------|----------|
| Charity's Name _____ _____ Number Street _____ City State ZIP Code | | _____ | \$ _____ |
| | | _____ | \$ _____ |

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
☐ Yes. Fill in the details.

| Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | Date of your loss | Value of property lost |
|--|---|-------------------|------------------------|
| | | _____ | \$ _____ |

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☒ No
☐ Yes. Fill in the details.

| Person Who Was Paid | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|--|---|-----------------------------------|-------------------|
| Number Street _____ City State ZIP Code | | _____ | \$ _____ |
| Email or website address _____ Person Who Made the Payment, if Not You | | _____ | \$ _____ |

Debtor 1 Antonia Flores
First Name Middle Name Last Name

Case number (if known) _____

| Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|---|-----------------------------------|----------------------|
| Person Who Was Paid _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____ Email or website address _____ Person Who Made the Payment, if Not You _____ | _____ _____ | \$ _____ \$ _____ |

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

| Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|--|-----------------------------------|----------------------|
| Person Who Was Paid _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____ | _____ _____ | \$ _____ \$ _____ |

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).
Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

| Description and value of property transferred | Describe any property or payments received or debts paid in exchange | Date transfer was made |
|---|--|------------------------|
| Person Who Received Transfer _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____ Person's relationship to you _____ | | _____ |
| Person Who Received Transfer _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____ Person's relationship to you _____ | | _____ |

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Case number (if known) _____

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No
☐ Yes. Fill in the details.

| Name of trust | Description and value of the property transferred | Date transfer was made |
|----------------|---|------------------------|
| _____ _____ | | _____ |

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
☐ Yes. Fill in the details.

| Name of Financial Institution | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
|--|---------------------------------|--|--|---|
| _____ _____ _____ City State ZIP Code | XXXX-____ | <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____ | _____ | \$ _____ |
| _____ _____ _____ City State ZIP Code | XXXX-____ | <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____ | _____ | \$ _____ |

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
☐ Yes. Fill in the details.

| Name of Financial Institution | Who else had access to it? | Describe the contents | Do you still have it? |
|--|--|-----------------------|---|
| _____ _____ _____ City State ZIP Code | _____ _____ _____ City State ZIP Code | | <input type="checkbox"/> No <input type="checkbox"/> Yes |

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First Name Middle Name Last Name

Case number (if known) _____

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
☐ Yes. Fill in the details.

| Who else has or had access to it? | | Describe the contents | Do you still have it? |
|-----------------------------------|---------------------|-----------------------|---|
| Name of Storage Facility | Name | | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Number Street | Number Street | | |
| City State ZIP Code | City State ZIP Code | | |
| City State ZIP Code | City State ZIP Code | | |

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
☐ Yes. Fill in the details.

| Where is the property? | | Describe the property | Value |
|------------------------|---------------------|-----------------------|----------|
| Owner's Name | | | \$ _____ |
| Number Street | Number Street | | |
| City State ZIP Code | City State ZIP Code | | |
| City State ZIP Code | City State ZIP Code | | |

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Fill in the details.

| Governmental unit | | Environmental law, if you know it | Date of notice |
|---------------------|---------------------|-----------------------------------|----------------|
| Name of site | Governmental unit | | _____ |
| Number Street | Number Street | | |
| City State ZIP Code | City State ZIP Code | | |
| City State ZIP Code | City State ZIP Code | | |

Debtor 1 Antonia Flores
First Name Middle Name Last Name

Case number (if known) _____

25. Have you notified any governmental unit of any release of hazardous material?

☒ No

☐ Yes. Fill in the details.

| Governmental unit | | Environmental law, if you know it | Date of notice |
|---------------------|---------------------|-----------------------------------|----------------|
| Name of site | Governmental unit | | |
| Number Street | Number Street | | |
| | City State ZIP Code | | |
| City State ZIP Code | | | |

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No

☐ Yes. Fill in the details.

| Court or agency | Nature of the case | Status of the case |
|---------------------|--------------------|------------------------------------|
| Case title | | <input type="checkbox"/> Pending |
| Court Name | | <input type="checkbox"/> On appeal |
| Number Street | | <input type="checkbox"/> Concluded |
| Case number | | |
| City State ZIP Code | | |

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

☒ No. None of the above applies. Go to Part 12.

☐ Yes. Check all that apply above and fill in the details below for each business.

| Describe the nature of the business | | Employer Identification number |
|-------------------------------------|----------------------------------|--|
| | | Do not include Social Security number or ITIN. |
| Business Name | | EIN: _____ |
| Number Street | | |
| | Name of accountant or bookkeeper | Dates business existed |
| | | From _____ To _____ |
| City State ZIP Code | | |
| Describe the nature of the business | | Employer Identification number |
| | | Do not include Social Security number or ITIN. |
| Business Name | | EIN: _____ |
| Number Street | | |
| | Name of accountant or bookkeeper | Dates business existed |
| | | From _____ To _____ |
| City State ZIP Code | | |

Debtor 1 Antonia Flores
First Name Middle Name Last Name

Case number (if known) _____

Business Name _____

Number Street _____

City State ZIP Code _____

Describe the nature of the business

Name of accountant or bookkeeper

Employer Identification number

Do not include Social Security number or ITIN.

EIN: _____

Dates business existed

From _____ To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☒ No
☐ Yes. Fill in the details below.

Date issued

Name _____

MM / DD / YYYY _____

Number Street _____

City State ZIP Code _____

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

x 
Signature of Debtor 1

x _____
Signature of Debtor 2

Date 10-05-2018

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No
☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
CENTRAL DISTRICT OF CALIFORNIA

In re Antonia Flores

Case No. _____

Debtor

Chapter 13

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ 3,250.00

Prior to the filing of this statement I have received \$ 1250.00

Balance Due \$ 2000.00

2. The source of the compensation paid to me was:

☒ Debtor

☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor

☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

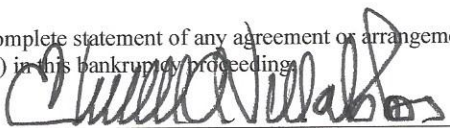
6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:
No adversary proceedings

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

10/19/2018

Date


Signature of Attorney

Law Offices of Edward A Villalobos & Assoc

Name of law firm

| | | | |
|---|--|---|--|
| <p>Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address</p> <p>Edward A Villalobos 3711 Long Beach Blvd., Ste 806A Long Beach, CA 90807 W: 562-595-6021 F: 562-427-4268 State Bar No.: 58536 Email: villaloboslaw@gmail.com</p> | | <p>FOR COURT USE ONLY</p> | |
| <p><input type="checkbox"/> Debtor(s) appearing without an attorney <input checked="" type="checkbox"/> Attorney for Debtor(s)</p> | | | |
| <p>UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA - LOS ANGELES DIVISION</p> | | | |
| <p>In re: Antonia Flores</p> | | <p>CASE NO.: CHAPTER: 13</p> | |
| | | <p>DECLARATION BY DEBTOR(S) AS TO WHETHER INCOME WAS RECEIVED FROM AN EMPLOYER WITHIN 60 DAYS OF THE PETITION DATE</p> <p>[11 U.S.C. § 521(a)(1)(B)(iv)]</p> | |
| <p>Debtor(s).</p> | | <p>[No hearing required]</p> | |

Debtor(s) provides the following declaration(s) as to whether income was received from an employer within 60 days of the Debtor(s) filing this bankruptcy case (Petition Date), as required by 11 U.S.C. § 521(a)(1)(B)(iv):

Declaration of Debtor 1

1. ☒ I am Debtor 1 in this case, and I declare under penalty of perjury that the following information is true and correct:

During the 60-day period before the Petition Date (Check only ONE box below):

- ☐ **I was paid by an employer.** Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. (If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.)
- ☐ **I was not paid by an employer** because I was either self-employed only, or not employed.

Date: 10-17-2018

Antonia Flores

Printed name of Debtor 1

Antonio Jones
Signature of Debtor

Signature of Debtor 1

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

| Employee Id | Employee Name | Period Ending | Check Sort Group |
|-------------|-----------------|---------------|------------------|
| 534254 | FLORES, ANTONIA | 09/16/18 | |

| Net Pay Calculation | | | Taxes Withheld | | |
|---------------------------------|----------|----------|----------------------|----------|----------|
| | Current | YTD | | Current | YTD |
| Gross Pay | 2,365.00 | 2,365.00 | FICA | 146.63 | 146.63 |
| Other Earnings & Reimbursements | 1,382.56 | 1,382.56 | MEDI | 34.29 | 34.29 |
| Taxes And Deductions | 1,563.48 | 1,563.48 | Total Taxes Withheld | 180.92 | 180.92 |
| Net Pay | 2,184.08 | 2,184.08 | After Tax Deductions | | |
| Direct Deposit Distributions | 2,184.08 | 2,184.08 | COM DATA | 1,382.56 | 1,382.56 |
| Check Amount | .00 | .00 | | | |

| Taxable Gross Wages Subject To: | | | Direct Deposit Distributions | | |
|---------------------------------|----------|----------|--------------------------------|----------|----------|
| | Current | YTD | | Current | YTD |
| FIT | 2,365.00 | 2,365.00 | Employee Direct Deposit of Net | 2,184.08 | 2,184.08 |

| Earnings Summary | | Hours | | Earnings | |
|------------------|---------|-------|---------|----------|----------|
| | Current | YTD | Current | YTD | |
| Regular | 40.00 | 40.00 | | 880.00 | 880.00 |
| Overtime | 45.00 | 45.00 | | 1,485.00 | 1,485.00 |
| Total | 85.00 | 85.00 | | 2,365.00 | 2,365.00 |

| Current Period Earnings | | | | | |
|-------------------------|-------|-------|----------|---|--------|
| S | Hours | Rate | Amount | S | Hours |
| 1 | 45.00 | 33.00 | 1,485.00 | 1 | 40.00 |
| | | | | | 22.00 |
| | | | | | 880.00 |

| Current Period Distributions | | | | | |
|------------------------------|-----------------------------|-------|-------|-------|--|
| Date | Distribution | Reg | Prem1 | Prem2 | |
| 09/16/18 | J=28418055 CT=10 CC=1810110 | .00 | 12.00 | .00 | |
| 09/15/18 | J=28418055 CT=10 CC=1011000 | .00 | 12.00 | .00 | |
| 09/14/18 | J=28418055 CT=10 CC=1011000 | .00 | 12.00 | .00 | |
| 09/13/18 | J=28418055 CT=10 CC=1011000 | 3.00 | 9.00 | .00 | |
| 09/12/18 | J=28418055 CT=10 CC=1011000 | 12.00 | .00 | .00 | |
| 09/11/18 | J=28418055 CT=10 CC=1810110 | 12.00 | .00 | .00 | |
| 09/10/18 | J=28418055 CT=10 CC=1011000 | 13.00 | .00 | .00 | |

| Other Earnings & Reimb. | | Taxable | Current | YTD |
|-------------------------------|------|---------|----------|----------|
| SUBSISTENCE/PER DIEM-NON TAX | B No | | 700.00 | 700.00 |
| TRAVEL NON-TAXABLE | No | | 682.56 | 682.56 |
| Total Other Earnings & Reimb. | | | 1,382.56 | 1,382.56 |



WELLS FARGO BANK, NA

DIRECT DEPOSIT 2233696

| AMOUNT |
|---------------|
| *****2,184.08 |

DATE September 21, 2018

PAY **TWO THOUSAND**
 ONE HUNDRED EIGHTY-FOUR AND 08/100 DOLLARS

O THE ANTONIA FLORES
 ORDER 15228 S BUTLER AVE
 OF COMPTON CA 90221 UNITED STATES OF AMERICA

NON-NEGOTIABLE
 NON-NEGOTIABLE
 NON-NEGOTIABLE
 NON-NEGOTIABLE
 NON-NEGOTIABLE

| Employee Id | Employee Name | Period Ending | Check Sort Group |
|-------------|-----------------|---------------|------------------|
| 534254 | FLORES, ANTONIA | 09/23/18 | |

| Net Pay Calculation | | |
|---------------------------------|-----------------|-----------------|
| | Current | YTD |
| Gross Pay | 1,540.00 | 3,905.00 |
| Other Earnings & Reimbursements | 600.00 | 1,982.56 |
| Taxes And Deductions | 817.81 | 2,381.29 |
| Net Pay | 1,322.19 | 3,506.27 |
| Direct Deposit Distributions | 1,322.19 | 3,506.27 |
| Check Amount | .00 | .00 |

| Taxable Gross Wages Subject To: | | |
|---------------------------------|----------|----------|
| | Current | YTD |
| FIT | 1,540.00 | 3,905.00 |

| Earnings Summary | | Hours | | Earnings | |
|------------------|--|--------------|---------------|-----------------|-----------------|
| | | Current | YTD | Current | YTD |
| Regular | | 40.00 | 80.00 | 880.00 | 1,760.00 |
| Overtime | | 20.00 | 65.00 | 660.00 | 2,145.00 |
| Total | | 60.00 | 145.00 | 1,540.00 | 3,905.00 |

| Current Period Earnings | | | | | | | |
|-------------------------|-------|-------|--------|---|-------|-------|--------|
| S | Hours | Rate | Amount | S | Hours | Rate | Amount |
| 1 | 40.00 | 22.00 | 880.00 | 1 | 20.00 | 33.00 | 660.00 |

| Current Period Distributions | | | | | |
|------------------------------|-----------------------------|--|--|-------|-------------|
| Date | Distribution | | | Reg | Prem1 Prem2 |
| 09/21/18 | J=28418055 CT=10 CC=1011000 | | | .00 | 12.00 .00 |
| 09/20/18 | J=28418055 CT=10 CC=1011000 | | | 4.00 | 8.00 .00 |
| 09/19/18 | J=28418055 CT=10 CC=1011000 | | | 12.00 | .00 .00 |
| 09/18/18 | J=28418055 CT=10 CC=1011000 | | | 12.00 | .00 .00 |
| 09/17/18 | J=28418055 CT=10 CC=1011000 | | | 12.00 | .00 .00 |

| Other Earnings & Reimb. | | Taxable | Current | YTD |
|--|------|---------|---------------|-----------------|
| SUBSISTENCE/PER DIEM-NON TAX | B No | | 600.00 | 1,300.00 |
| TRAVEL NON-TAXABLE | No | | .00 | 682.56 |
| Total Other Earnings & Reimb. | | | 600.00 | 1,982.56 |

| Taxes Withheld | | Current | YTD |
|-----------------------------|--|---------------|---------------|
| FICA | | 95.48 | 242.11 |
| MEDI | | 22.33 | 56.62 |
| Total Taxes Withheld | | 117.81 | 298.73 |

| After Tax Deductions | | Current | YTD |
|----------------------|--|---------|----------|
| COM DATA | | 700.00 | 2,082.56 |

| Direct Deposit Distributions | | Current | YTD |
|--------------------------------|--|----------|----------|
| Employee Direct Deposit of Net | | 1,322.19 | 3,506.27 |



MATRIX SERVICE

California Payroll
500 W. Collins Ave
Orange, CA 92867
714 289 6600

WELLS FARGO BANK, NA

DIRECT DEPOSIT 2238296

| AMOUNT |
|---------------|
| *****1,322.19 |

DATE September 28, 2018

PAY **ONE THOUSAND**
THREE HUNDRED TWENTY-TWO AND 19/100 DOLLARS

TO THE ORDER OF ANTONIA FLORES
15228 S BUTLER AVE
COMPTON CA 90221 UNITED STATES OF AMERICA

NON-NEGOTIABLE
NON-NEGOTIABLE
NON-NEGOTIABLE
NON-NEGOTIABLE
NON-NEGOTIABLE

| Employee Id | Employee Name | Main Document | Page 18 of 22 | Period Ending | Check Sort Group |
|-------------|-----------------|---------------|---------------|---------------|------------------|
| 534254 | FLORES, ANTONIA | | | 09/30/18 | |

| Net Pay Calculation | | | Current | YTD | Taxes Withheld | | Current | YTD |
|---------------------------------|-----------------------------|---------|----------|----------|--------------------------------|-------|----------|----------|
| Gross Pay | | | 2,332.00 | 6,237.00 | FICA | | 144.58 | 386.69 |
| Other Earnings & Reimbursements | | | 700.00 | 2,682.56 | MEDI | | 33.82 | 90.44 |
| Taxes And Deductions | | | 878.40 | 3,259.69 | Total Taxes Withheld | | 178.40 | 477.13 |
| Net Pay | | | 2,153.60 | 5,659.87 | After Tax Deductions | | | |
| Direct Deposit Distributions | | | 2,153.60 | 5,659.87 | COM DATA | | 700.00 | 2,782.56 |
| Check Amount | | | .00 | .00 | Direct Deposit Distributions | | Current | YTD |
| Taxable Gross Wages Subject To: | | | Current | YTD | Employee Direct Deposit of Net | | 2,153.60 | 5,659.87 |
| FIT | | | 2,332.00 | 6,237.00 | | | | |
| | | | | | | | | |
| Earnings Summary | | Hours | | Earnings | | | | |
| | | Current | YTD | Current | YTD | | | |
| Regular | | 40.00 | 120.00 | 880.00 | 2,640.00 | | | |
| Overtime | | 44.00 | 109.00 | 1,452.00 | 3,597.00 | | | |
| Total | | 84.00 | 229.00 | 2,332.00 | 6,237.00 | | | |
| Current Period Earnings | | | | | | | | |
| S | Hours | Rate | Amount | S | Hours | Rate | Amount | |
| 1 | 44.00 | 33.00 | 1,452.00 | 1 | 40.00 | 22.00 | 880.00 | |
| Current Period Distributions | | | | | | | | |
| Date | Distribution | | | Reg | Prem1 | Prem2 | | |
| 09/30/18 | J=28418055 CT=10 CC=1011000 | | | .00 | 12.00 | .00 | | |
| 09/29/18 | J=28418055 CT=10 CC=1011000 | | | .00 | 12.00 | .00 | | |
| 09/28/18 | J=28418055 CT=10 CC=1011000 | | | .00 | 12.00 | .00 | | |
| 09/27/18 | J=28418055 CT=10 CC=1011000 | | | 4.00 | 8.00 | .00 | | |
| 09/26/18 | J=28418055 CT=10 CC=1011000 | | | 12.00 | .00 | .00 | | |
| 09/25/18 | J=28418055 CT=10 CC=1011000 | | | 12.00 | .00 | .00 | | |
| 09/24/18 | J=28418055 CT=10 CC=1011000 | | | 12.00 | .00 | .00 | | |
| Other Earnings & Reimb. | | Taxable | Current | YTD | | | | |
| SUBSISTENCE/PER DIEM-NON TAX | | No | 700.00 | 2,000.00 | | | | |
| TRAVEL NON-TAXABLE | | No | .00 | 682.56 | | | | |
| Total Other Earnings & Reimb. | | | 700.00 | 2,682.56 | | | | |



MATRIX SERVICE

California Payroll
500 W Collins Ave
Orange, CA 92667
714 289 6600

WELLS FARGO BANK, NA

DIRECT DEPOSIT 2243106

AMOUNT

*****2,153.60

DATE October 05, 2018

PAY **TWO THOUSAND**
ONE HUNDRED FIFTY-THREE AND 60/100 DOLLARS

TO THE ORDER OF ANTONIA FLORES
15228 S BUTLER AVE
COMPTON CA 90221 UNITED STATES OF AMERICA

NON-NEGOTIABLE
NON-NEGOTIABLE
NON-NEGOTIABLE
NON-NEGOTIABLE
NON-NEGOTIABLE

| Employee Id | Employee Name | Main Document | Page 19 of 22 | Period Ending | Check Sort Group |
|-------------|-----------------|---------------|---------------|---------------|------------------|
| 534254 | FLORES, ANTONIA | | | 10/07/18 | |

| Net Pay Calculation | | |
|---------------------------------|----------|----------|
| | Current | YTD |
| Gross Pay | 792.00 | 7,029.00 |
| Other Earnings & Reimbursements | 1,182.56 | 3,865.12 |
| Taxes And Deductions | 1,043.15 | 4,302.84 |
| Net Pay | 931.41 | 6,591.28 |
| Direct Deposit Distributions | 931.41 | 6,591.28 |
| Check Amount | .00 | .00 |

| Taxes Withheld | | | |
|----------------------|---------|--------|--|
| | Current | YTD | |
| FICA | 49.11 | 435.80 | |
| MEDI | 11.48 | 101.92 | |
| Total Taxes Withheld | 60.59 | 537.72 | |

| Taxable Gross Wages Subject To: | | |
|---------------------------------|---------|----------|
| | Current | YTD |
| FIT | 792.00 | 7,029.00 |

| After Tax Deductions | | | |
|----------------------|---------|----------|--|
| | Current | YTD | |
| COM DATA | 982.56 | 3,765.12 | |

| Direct Deposit Distributions | | | |
|--------------------------------|---------|----------|--|
| | Current | YTD | |
| Employee Direct Deposit of Net | 931.41 | 6,591.28 | |

| Earnings Summary | | Hours | | Earnings | |
|------------------|--|---------|--------|----------|----------|
| | | Current | YTD | Current | YTD |
| Regular | | 36.00 | 156.00 | 792.00 | 3,432.00 |
| Overtime | | .00 | 109.00 | .00 | 3,597.00 |
| Total | | 36.00 | 265.00 | 792.00 | 7,029.00 |

| Current Period Earnings | | | | | | |
|-------------------------|-------|-------|--------|---|-------|------|
| S | Hours | Rate | Amount | S | Hours | Rate |
| 1 | 36.00 | 22.00 | 792.00 | | | |

| Current Period Distributions | | | | | | |
|------------------------------|-----------------------------|--|--|-------|-------|-------|
| Date | Distribution | | | Reg | Prem1 | Prem2 |
| 10/03/18 | J=28418055 CT=10 CC=1011000 | | | 12.00 | .00 | .00 |
| 10/02/18 | J=28418055 CT=10 CC=1011000 | | | 12.00 | .00 | .00 |
| 10/01/18 | J=28418055 CT=10 CC=1011000 | | | 12.00 | .00 | .00 |

| Other Earnings & Reimb. | | Taxable | Current | YTD |
|-------------------------------|------|---------|----------|----------|
| SUBSISTENCE/PER DIEM-NON TAX | B No | | 500.00 | 2,500.00 |
| TRAVEL NON-TAXABLE | No | | 682.56 | 1,365.12 |
| Total Other Earnings & Reimb. | | | 1,182.56 | 3,865.12 |



MATRIX SERVICE

California Payroll
500 W. Collins Ave.
Orange, CA 92667
714 289 6600

WELLS FARGO BANK, NA

DIRECT DEPOSIT 2248075

AMOUNT

*****931.41

DATE October 12, 2018

PAY **NINE HUNDRED THIRTY-ONE AND 41/100 DOLLARS**

TO THE ORDER OF ANTONIA FLORES
15228 S BUTLER AVE
COMPTON CA 90221 UNITED STATES OF AMERICA

NON-NEGOTIABLE
NON-NEGOTIABLE
NON-NEGOTIABLE
NON-NEGOTIABLE
NON-NEGOTIABLE

Fill in this information to identify your case:

Debtor 1 ANTONIA FLORIS
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: CENTRAL District of CA
(State)

Case number
(If known)

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

- ☐ 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
- ☒ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
- ☐ 3. The commitment period is 3 years.
- ☒ 4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

☒ Not married. Fill out Column A, lines 2-11.

☐ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

Column A
Debtor 1

Column B
Debtor 2 or
non-filing spouse

2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).

\$ 3440.00

3. Alimony and maintenance payments. Do not include payments from a spouse.

\$ _____

4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.

\$ 3000.00

5. Net income from operating a business, profession, or farm

Debtor 1 Debtor 2

Gross receipts (before all deductions) \$ _____ \$ _____

Ordinary and necessary operating expenses - \$ _____ - \$ _____

Net monthly income from a business, profession, or farm \$ _____ \$ _____

Copy
here →

\$ 0

6. Net income from rental and other real property

Debtor 1 Debtor 2

Gross receipts (before all deductions) \$ _____ \$ _____

Ordinary and necessary operating expenses - \$ _____ - \$ _____

Net monthly income from rental or other real property \$ _____ \$ _____

Copy
here →

\$ 0

Debtor 1

ANTONIA

First Name Middle Name Last Name

Case number (if known)

Column A
Debtor 1Column B
Debtor 2 or
non-filing spouse

7. Interest, dividends, and royalties

\$ 0

\$

8. Unemployment compensation

\$ 0

\$

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \downarrow

For you \$

For your spouse \$

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

\$ 0

\$

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

\$ 0

\$

\$

\$

+ \$ 0

+ \$

Total amounts from separate pages, if any.

11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ 6440

+ \$ 0

= \$ 6440.00

Total average
monthly income

Part 2: Determine How to Measure Your Deductions from Income

12. Copy your total average monthly income from line 11.

\$ 6440.00

13. Calculate the marital adjustment. Check one:

☒ You are not married. Fill in 0 below.☐ You are married and your spouse is filing with you. Fill in 0 below.☐ You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

\$

\$

\$

\$

+

+

Total

\$ 0

Copy here \rightarrow

- 0

14. Your current monthly income. Subtract the total in line 13 from line 12.

\$ 6440.00

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here \rightarrow

\$ 6440.00

Multiply line 15a by 12 (the number of months in a year).

x 12

15b. The result is your current monthly income for the year for this part of the form.

\$ 77280.00

Debtor 1 Antonia Flores
First Name Middle Name Last Name

Case number (if known) _____

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live. CA

16b. Fill in the number of people in your household. 2

16c. Fill in the median family income for your state and size of household. \$ 63745.00
To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

17a. ☐ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).*

17b. ☒ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2).*
On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)

18. Copy your total average monthly income from line 11. \$ 6440.00

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. \$ 0

19b. Subtract line 19a from line 18. \$ 6440.00

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b. \$ 6440.00

Multiply by 12 (the number of months in a year).

x 12

20b. The result is your current monthly income for the year for this part of the form. \$ 72780.00

20c. Copy the median family income for your state and size of household from line 16c. \$ 63745.00

21. How do the lines compare?

☐ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years. Go to Part 4.*

☒ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years. Go to Part 4.*

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X Antonia Flores
Signature of Debtor 1

X _____
Signature of Debtor 2

Date 10 17 2018
MM / DD / YYYY

Date _____
MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.